No Hanky Panky! Sexual Abstinence: The No. 1 Solution to America's Teen Pregnancies

Anette Nibe
Odense, Denmark

Abstract: *The essay discusses the current Bush administration's reasons for providing political, economic, and moral support for national and state promotions of the sexual abstinence message as a sure way to save the sexually active American teens from themselves. Many conservatives advocate sexual abstinence as the best way to prevent the many teen pregnancies, teen births, and the rapid growth in STDs among young Americans. The State of Mississippi will serve as an example of the issues and attitudes throughout the essay.*

Key words: *Welfare Reform Act – Sexual abstinence – Abstinence-only – Abstinence-plus – President George W. Bush – Teenage sexuality – Mississippi*

In the final draft of the groundbreaking 1996 Welfare Reform Act, abstinence education does not receive a prominent position. In fact, abstinence education is mentioned only in the very last section – Section 510 – of the bill. Yet the abstinence message has indeed gained new prominence during the George W. Bush presidency. The idea behind granting government money to the individual state is, according to the act, "to enable the State to provide abstinence education, and at the option of the State, where appropriate, mentoring, counselling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are the most likely to bear children out-of-wedlock." The act further specifies what is meant by the term "abstinence education." It says:

> 'Abstinence education' means an educational or motivational program which:
> has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity; teaches abstinence from sexual activity outside marriage as the expected standard for all school age children; teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems; teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity; teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society; teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and teaches the importance of attaining self-sufficiency before engaging in sexual activity.[1]

As with many of the other provisions of the 1996 Welfare Reform Act, it is clear that the provisions regarding abstinence is intended to spur change on the part of the individual American woman's decision to have sex and children outside marriage. It is by stressing the moral, personal and societal gains from abstaining from engaging in sexual relations before marriage that America's compareatively high rates of teen motherhood and sexually transmitted diseases will be reduced. Or put differently, reforming the behavioral attitudes of especially teen women from low-income households so that they conform to middle class values of self-sufficiency through work, marriage and family – is deemed crucial by the majority of Republicans – including the President – and others behind the Act and its recently reauthorized version. Alleged behavioral problems are thus still perceived to hold the key to America's high rates of teen mothers and single mothers in the welfare system, just as they have through most of American welfare history. Thus, if these mothers can just be reformed to abstain from having sex outside marriage – and potential teen mothers can be successfully imprinted equally to abstain from sex before marriage – then the problem is solved.

Overall, I find the tenets of the abstinence section of the 1996 Welfare Reform Act naïve at best; harmful at worst. A number of the points made are, however, difficult to argue against. I mean, "abstinence from sexual activity is [undoubtedly] the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems." Thus, when President Bush in his January 2004 State of the Union Address repeats the bill's message when saying that "Abstinence

1. Welfare Reform Bill: HR 3734, Final Passage, Section 912 on Abstinence Education.

for young people is the only certain way to avoid sexually-transmitted diseases,"[2] it is hard to disagree. What both the bill and the President fail to say, however, is what is meant by "sexual activity"? This lack of a definition can indeed prove to have harmful consequences for many teens. In addition, the widespread use of fear-based tactics in getting their messages across risk giving future generations of teens bungled sexualities, because sex and sexuality have been treated as a taboo by responsible adults leaving teens to alternative ways to acquire the sexual knowledge that naturally is crucial for many a hormone-ridden teenager in love. But let us now look more at the Bush administration's reasons for supporting abstinence education over safe sex education and what arguments are being made scholarly in favor and against both kinds of sex education.

The reasons why abstinence education receives such warm devotion on the part of President Bush and his supporters seem obvious. Government funding of, for example, transitional or permanent housing options for teen mothers, as proposed by director Daisy Cobbins at the Jackson, Mississippi Work Ready School, or favorable student scholarships and/or loans to welfare dependent single mothers, who have the academic ability and wish to use their maximum of five years on TANF to get a college degree thus improving their own and their children's future social and economic prospects significantly, are very costly programs for the government to commit itself to – if done whole-heartedly. In addition, for a Republican President it is difficult, if at all desirable, to justify spending tax payers' money on such costly programs, which, at least in theory, makes it easier for teen- and single mothers in general to give birth and to live as single parents. And that clearly goes against conservative, and particularly the Religious New Right, ideology stressing the importance of economically independent two-parent households held together by the biblical ties of marriage. Thus, it is a wish to engage in less costly welfare initiatives combined with morals and ideology largely influenced by Christian fundamentalism that sets the political agenda on welfare issues under the current administration, and hence also its proposed solutions to reducing the number of teen- and single mothers. The strong faith in the promises of the abstinence-only message (without yet having any conclusive studies from independent research institutions – showing that the

2. President George W. Bush, " State of the Union Address," January 20, 2004.

declines in teen pregnancy and motherhood rates result from abstinence-only education) attests to this blind conviction on the part of the President and his followers.

The 1996 Welfare Reform Act originally earmarked $50 milllion a year for the program, requiring a state matching fund of $3 for every $4 spent on abstinence education by the federal government. In the first months of 2004, the government was spending $80 million yearly on the funding of abstinence programs targeting primarily American teens and children approaching their teens. But in his 2004 State of the Union Address President Bush encouraged a doubling of the funding in 2004 and a tripling of the funding by 2005, up from $80 million a year in 2004 to more than $270 million in 2005.[3] This is, as the figures clearly show, a marked increase in federal funding of state-run abstinence-only programs – and it is a marked increase in the funds compared to the amounts suggested in the Bush administrations re-authorization proposal from 2002, where it is recommended that spending should be kept at the 1996 level, which was $50 million yearly. It is indeed thought-provoking to note that in this re-authorization proposal called "Working Toward Independence" the government admits that is has no solid scientific proof that the tax payers' money invested in abstinence programs is a good investment in terms of reducing the number of teen pregnancies, births and sexually transmitted diseases. The proposal points out that: "In 1997, Congress appropriated funds to conduct a scientific evaluation of several of these state programs. This evaluation is now well underway and is expected to begin yielding results on program impacts on sexual activity, pregnancy, and other measures by 2003. Given the pending welfare reform reauthorization, Congress cannot wait on these results" [before determining the funds allocated to abstinence education].[4]

This serves as yet another indication that the current administration is guided more by ideology, morals, and preferred values when addressing the challenges to the teens affected by pregnancy, births, and STDs (sexually transmitted diseases), rather than awaiting the results of a report ordered by Congress.

3. "President Bush Wants Abstinence Program Funding Tripled by 2005," *Christian Life Resources*, January 22, 2004. http://www.ChristianLifeResources.com

4. "Working toward Independence," p. 22.

In May 2002 the Bush administration took its abstinence-only over safe-sex education message to the United Nations' Special Session on Children. At a news conference Anne Peterson, who works for the U.S. Agency for International Development's Bureau for Global Health, announced that the Bush administration's aim with an abstinence-only policy was to prevent STDs and teen pregnancies domestically as well as internationally. In addition, she pointed out that the American government supported a raise in the age of marriage worldwide in order to reduce the often serious health effects of early births in cases where abstinence-only is not a solution.[5] Another action taken on the part of the Bush administration has been to block payments to the United Nations Population Fund because it suspected that American funds were being used to finance abortions in China. This mingling of domestic and international, often third world, policy is understandable. It might prove politically and morally difficult to justify the funding of programs abroad that one would not permit the funding of at home. However understandable, it is nevertheless a grave disregarding of the harsh conditions for many girls and teen women in third world countries. Adrienne Germain, who is the president of the International Women's Health Coalition, aptly points out that "In the developing world, pregnant girls are most often married, sometimes at 10 or younger, or are the victims of sexual coercion and trafficking" (quoted in Crossette). According to UNICEF pregnancy is the number one cause of death in developing countries among teenagers aged 15-19, who often have no option but to give birth. Medically safe abortions are out of the question for these young poor women – just as they are in many cases in the U.S. where some states, including Mississippi, prohibit public funding of abortions unless the pregnancy is the result of rape, incest or the pregnancy poses a health risk for the pregnant teen. This is a course against abortion supported by President Bush.

Reasoning that promiscuous behavior explains the majority of teen pregnancies, motherhood, and STDs in the U.S. as well as in developing countries is both dangerous and erroneous. In the U.S., young girls are often coerced to have sex with older males. This unpleasant fact is, however, largely overlooked in the debate and in the forming of social policy

5. Barbara Crossette, "U.S. Tells Teen Girls Worldwide to Just Say No," *Alternet*.org, May 29, 2002. http://www.alternet.org/print.html?StoryID=13229

by American policy makers. Ignorance of how to practice safe sex and limited access to contraception, particularly among low-income citizens or people living in Asia and Africa, is often lethal. As things are at present, AIDS is spreading rapidly among girls and women in the third world, outstripping the rates among men. The issues involved are obviously much more complex than simply abstaining from sexual relationships. After all, what is actually meant by abstinence? What does it mean to be abstinent? And what kind of sexual practices is it exactly that policy makers want especially teens to abstain from? And how do these political expectations correlate with those of American teens?

Defining Abstinence

The first time the federal government invested in abstinence programs run at the local level was under the Reagan administration. In 1981 Congress thus passed, and the President signed, the Adolescent Family Life Act (AFLA), which encouraged and small government contributions to the funding of state programs intended to reduce the number of teen pregnancies through "chastity and self-discipline" among teens.[6] Not surprisingly, considering that the 1980s was a period where America took a more conservative course on political, cultural and moral issues, we see in the AFLA the emphasis on the alleged behavioral problems with especially low-income American teens over other structural and socio-economic problems troubling American society in general. And the abstinence approach came to influence debates on the issue of teen motherhood and pregnancy for the next 20 odd years, just as it has come to influence all social and health polices targeting American teens. It is, however, not all over the U.S. that abstinence-only prevails. An AGI study from 1999 shows that there are substantial regional differences involved when discussing abstinence-only education. The study reports that "School districts in the South are most likely to have such policies (55%) and are least likely to have comprehensive programs (5%). In contrast, school districts in the Northeast are least likely to have an abstinence-only policy (20%)." These findings are not particularly surprising given

6. Cited in "Sex Education: Politicians, Parents, Teachers and Teens," *The Alan Guttmacher Institute*, Issues in Brief, 2001 Series, No. 2. p. 1.

that liberal views and hence traditionally more relaxed attitudes toward sex outside marriage dominate in the Northeast, as opposed to the traditionally more conservative views to be found in the southern Bible belt, where sex typically is much more imbued with taboos. But what does it mean to be abstinent?

The importance of defining and communicating the exact meaning of what abstinent behavior entails is not merely of academic significance, as pointed out by Cynthia Dailard in "Understanding 'Abstinence': Implications for Individuals, Programs and Policies." Dailard maintains that such definitions are "crucial to public health efforts to reduce people's risk of pregnancy and STDs."[7] It is clear that abstinence means abstaining from having vaginal intercourse, but does it also mean abstaining from having oral and anal sex? The latter sexual activities are rarely included in the political discussion arguably because intercourse is the accepted and less controversial sexual norm, historically, culturally and not least biblically speaking. However, the federal legislation on the issues makes no such specific definitions on what "sexual activity" entails, hence it provides no definition of what abstinence from such sexual activity includes. According to Dailard this omission may have the unfortunate consequence of "promoting noncoital behaviors that leave young people at risk" (p. 5) of catching an STD. Studies on teens' definitions of sexual abstinence suggest that many consider oral, anal, and mutual masturbation as abstinent behavior. In "Oral Sex Among Adolescents: Is It Sex or Is It Abstinence?" Lisa Remez refers to a 1998 study conducted on the issue among students at southern colleges. She notes that "In the South, 61% [of college freshman and sophomore students] considered mutual masturbation ... to be abstinent behavior, 37% described oral intercourse as abstinence and 24% thought the same about anal intercourse." She continues, "The authors [of the report] surmised that pregnancy prevention came first in these students' perceptions, so behaviors unlinked to pregnancy then counted as abstinence."[8] In addition, a Kaiser Family Foundation study referred to by Cynthia Dailard

7. Cynthia Dailard, "Understanding 'Abstinence': Implications for Individuals, Programs and Policies," *The Alan Gutmacher Report on Public Policy*, December 2003, p. 4.

8. Lisa Remez, "Oral Sex Among Adolescents. Is It Sex or Is It Abstinence?" *Family Planning Perspectives*, 32/6 (November/December 2000) p. 302.

found, in the words of Dailard, that "half of all 15-17-year-olds believed that a person who has oral sex is still a virgin" (p. 5). Ultimately, if these studies are representative of teenage views across America, then the abstinence message is highly likely to fail in terms of reducing the high rates of STDs among American youth since neither oral nor anal sex protects them from catching sexually transmitted diseases. Despite these apparent discrepancies between teen and adult definitions of sexual abstinence, a large number of state governments across the U.S. fund and run abstinence-only programs teaching teens and children approaching their teens the values and importance of staying abstinent until marriage. Mississippi is one of these states.

Advocating Abstinence-only over Abstinence-plus Education

Mississippi has long had the dubious honor of topping the national list of teen pregnancies and births. And the statistics are indeed disturbing. In 1996 more than 21 percent of all babies born in the states were born by teen mothers. Of these, 25 percent were bringing child number two, three, four or five into the world. In addition "more than 80 percent of teen mothers were unmarried and about 45 percent were 17 or younger. Fifty percent of teen mothers drop out of school. Fifteen percent of teen pregnancies ended in abortion. Forty-five percent of all babies were born to parents out of wedlock. Twenty percent of pregnancy girls aged 15-19 were married, as opposed to 70 percent in 1965. And one in four sexually active teens contracts a sexually transmitted disease."[9]

For the past seven years Mississippi has been an abstinence-only state where the abstinence message has overshadowed the sex education message advocating a combined abstinence and safe sex message, the so-called 'abstinence-plus.' Under the former Mississippi governors, Kirk Fordice, Rep. and Ronny Musgrove, Dem., abstinence was promoted as it continues to be under the current republican governorship of Haley Barbour. Under the Musgrove administration it seemed that abstinence was promoted primarily because it won the widest public support and was less controversial than safe-sex education. During my interview with Michael

9. Statistics cited in Butch John, "Abstinence Only Message in State's Teen Pregnancy Fight," *The Clarion Ledger*, August 10, 1998, Main Section p. 1.

Bentley, who, at the time of my interview in July 2002 worked for Governor Musgrove in the Office of Citizen and Community Services, Bentley said about abstinence that "It has been the tool that we have seen that is the easiest to promote .... When you start ... discussing sexual practices with children, a lot of people are not in favor of that because they think that in so doing you will give them ideas on things that they may not understand." Bentley continues, "And whether that is reasonable or not, I can not tell you, but that is the thought process of a lot of people. So once you go out there and you start talking about using a condom or having safe sex, then a lot of people think that you are talking about sex, and in their minds, that is not what you should talk to young people about."[10]

I left the interview with Bentley with the impression that the Musgrove administration largely promoted and supported abstinence-only, not because statistics or rapports on the issue showed that the approach was successful, but because rallying public and political support for abstinence-only funding is much easier and much less controversial in a traditionally conservative state like Mississippi. When I confronted Bentley with a 2001 Gallup poll indicating that sixty percent of Americans approve of premarital sex, asking him if this did not conflict with the abstinence-only message promoted by the Mississippi state government, he replied: "Well, right now there is ... nothing that we can point to that makes [abstinence-only] sure." In other words, like the Bush administration, the government of Mississippi under Musgrove had no conclusive scholarly studies proving abstinence-only to be more successful in reducing the number of teen pregnancies and births as well as the high rates of STDs. Bentley continued: "We can go on what we feel like is a good idea. The federal government has provided an opportunity for us to promote ... initiatives. But other than that there is nothing we can say [like] 'Hey, these are the stats that show for sure that our abstinence approach is working.'"

If the promotion of abstinence-only at the national and state levels is largely based on a feeling of it being the right thing to do – morally as well as socio-economically – rather than on well-documented and objective studies, then we can also anticipate that the abstinence-only

10. Interview with Michael Bentley, who worked in the Office of Citizen and Community Services during the Musgrove administration. Interview conducted on July 18, 2002, the Governor's office, Jackson, MS.

education taught in Mississippi and elsewhere is based largely on a feeling of what is the best way to get the message across to the teen target-group rather than on factual evidence. However, common for most state abstinence-only programs is that they teach more than merely sexual abstinence. According to the conservative, abstinence-only Family Research Council – with the declared goal of defending "faith, family, and freedom" – "Abstinence organizations ... [also] teach young people the skills they need to practice abstinence. Classes cover many topics including self-esteem building, self-control, decision-making, goal-setting, character education, and communication skills."[11] Such instruction and discussions with teens about character-building in any context can be useful in helping teens making the transition from adolescence to adulthood. But the fact that abstinence organizations, typically under the state Departments of Human Services (DHS) as in Mississippi, resort to a fear-based curricula in getting their abstinence-only message across to the teen target group is questionable. According to SIECUS "Fear-based curricula use shame and scare tactics to promote the message that abstinence until marriage is the only acceptable choice for adolescents."[12] As a natural extension of the provisions of abstinence education of the 1996 Welfare Reform Act, the predominating abstinence-only curriculum applied at the state level maintains that sex outside marriage has a number of negative consequences being "damaged family relationships; damaged spiritual health; lower self-esteem and poor emotional health; lack of future opportunities; inability to be normal or healthy; [and] infertility as an inevitable result of STDs." The Mississippi DHS-run-and-funded "Just Wait" Abstinence Unit is no exception.

When I visited the 'Just Wait' Abstinence Unit at the Mississippi Department of Human Services' state office in Jackson, I learned about the use of such fear-based curricula from talking to the two staff members in the unit, Tascha Martin and Quency Coleman. Martin and Coleman spend a lot of their work time visiting junior high schools and high schools across the state giving talks promoting the abstinence-only

11. Bridget E. Maher, "Abstinence until Marriage: The Best Message for Teens," *The Family Research Council*, January 5, 2004. http://www.frc.org/get.cfm?1

12. "Safe Sex," *SIECUS*, 1992, http://www.siecus.org/advocacy/reviews/revi0005.html

message. Both come across as very lively personalities with great confidence in the promises of the abstinence-only message. Their audience is undoubtedly captured by their dedication and strong personalities, as I was. The extent to which students take their abstinence-only message to heart by actually adhering to the principles of abstaining from sex until marriage is more doubtful and undocumented. This, however, does not seem to concern Martin and Coleman greatly, if they succeed at getting their message across to one teen, then their mission is accomplished. At the beginning of the interview, Martin said that; "Our message is very important – although some say it is not reaching the teens – but you are not going to reach them all. But if we reach one, then we are doing our job."[13] That is indeed a modest criterion for success – and arguably a costly one that makes one wonder whether the money could be allocated to initiatives proven to reduce the number of teen pregnancies and births as well as rates of STDs. In addition, admitting that they will not reach all students with their message, the DHS arguably leaves a hard to determine number of teens unprepared and undereducated on the issues of how to use and get contraception and how to practice sex in the safest way since the primary DHS efforts evolve around the abstinence-only message, as the work of the 'Just Wait' Abstinence Unit testifies.

The strategy applied by many abstinence-only programs, including the 'Just Wait' program, is typically a fear-based strategy to scare American youth into abstaining from sex outside marriage. In their class room presentations Martin and Coleman incorporate a number of experiments to activate the students as well as to illustrate the dangers of engaging in sexual activities with a person you know only little or nothing about. One of these student experiments, Martin told me, involves a black garbage bag – symbolizing sexual intercourse. She said, "We tell them to put their hand in the bag and then to pull it back out. And we ask them, 'What did you get?' And some will say 'Nothing' and some will give themselves a sexual transmitted disease like AIDS ... [The message is that] every time you engage in sex, you do not know what you are coming out with."

13. Interview with Tascha Martin & Quency Coleman, the "'Just Wait' Abstinence Unit" under the Department of Human Services, Jackson, Mississippi.

A second experiment is the so-called 'oreo cookie experiment.' Martin tells me how they "get five volunteers [among the student audience] where the fifth person will represent purity, because we all started out pure before we engage in sex." Martin further explains that they tell the other four to:

> Get an Oreo cookie, and we tell them to chew it, and then spit it into a cup of water and mix it up. Then we ask them to exchange cups. Now, this is going to show them how AIDS and all these other STDs are being transmitted back and forth, back and forth. So we say, now exchange cups – and then we will say, 'Now, drink it!' Of course they are not going to drink it. But see, what we are showing them: you won't drink that because you saw it coming out of a person's mouth. When you engage in sex, you do not see any of those things. So you are putting yourself at risk. (Martin & Coleman)

This use of students representing the 'purity' or innocence that we all have before engaging in sex – after which we are 'damaged goods' – and the black garbage bag symbolizing the dangers of being sexually active, all clearly illustrate the 'Just Wait' Unit's use of fear-based tactics in its talks to students. The negative emphasis on sex as a dangerous, and in some cases even a deadly activity is of course not all wrong. As I write these lines people worldwide are dying from AIDS and catching STDs impairing the health of the infected. And it is in most of these cases that the abstinence-plus and safe-sex message show their inefficiencies according to abstinence-only advocates. I asked Martin and Coleman, if there is something positive in the safe-sex message:

> You tell me .... Has it been proven? Even if you were to go that route talking about safe sex, they talk about condoms .... Look, we are past that – skin to skin contact – you get STDs from skin to skin contacts. We are doing the hand-in-the-pants illustration of guys walking around, so as they see another guy, they shake hands or whatever, and at some point we are going to put our hands in our mouths. The girls the same way, they will run after the girls, put their hands on them, and will eventually grap their hands. Now if anything is there, maybe you are carrying it over. Girls wear each other's clothes. If something is there, you can take it in. So is there a benefit in having safe sex? Somebody has got to answer that question, because I hear it all the time: 'What is safe sex?' Safe sex, and Tascha said it earlier, is no sex! (Martin & Coleman)

Again the fear-based line of argumentation in favor of abstinence is used, this time, to such an extreme that the example seems outright ridiculous.

The argumentation used is the same as saying that one has to stay clear of cars, if one does not have a wish to be maimed or to die in traffic.

An alternative to the abstinence-only approach is the so-called abstinence-plus approach that encourages teens to wait to have sex until it feels right to do so – and then when and if they do have sex, they should practice safe sex and be thoroughly instructed in schools and in youth organizations in how to protect themselves when sexually active. Not surprisingly, abstinence-plus is condemned by abstinence-only advocates. Martin says about abstinence-plus that "We cannot talk abstinence-plus prevention, it would be a contradiction to do so. You are telling them to wait and why they should wait, and then you go back and say, 'If you are going to have sex anyway this is what you should use.' That is contradicting the message .... While you are telling them to wait, you also encourage them not to wait." Coleman supplements by saying that, "To avoid confusion you have to be one way. It is either hot or cold. It cannot be luke-warm. It cannot be" (Coleman & Martin). This statement in particular illustrates the abstinence-only advocates', including President Bush's, disregard of the complexities involved in teenage sexuality. "It cannot be luke-warm" as Coleman maintains. It has to be "either hot or cold" – or put differently, the message has to be simple otherwise the teen target group is bound to be more confused than convinced that abstinence-only is, not only the best way, but also the only way.

The abstinence-only approach is devoid of the view that teen sexual behavior is a natural part of growing up – that it is in fact a developmental matter which abstinence-only advocates are trying to oppress by turning teenage sex drives into a moral behavioral defect. In their study of "European Approaches to Adolescent Sexual Behavior & Responsibility" Linda Berne and Barbara Huberman take a close look at how the French, the Dutch and the Germans approach teen sexuality in contrast to predominating American approaches. And one of the main differences lay in how teen sexuality is defined. They note that "in the Netherlands, Germany, and France, teen sexual behavior is a developmental and public health issue. The consensus about this demands family and community support and all adults' having a role in communicating with teens about prevention and protection." In contrast, "Teen sexual behavior in the United States is viewed in many contexts as: a moral failing, a political

issue, a private family matter, or a public health concern, but seldom as a developmental matter."[14]

The fact that teen sexuality issues are often turned into issues of moral and political importance in the American debate can be gravely detrimental to the socio-economic importance of reducing the number of teen pregnancies, births and the high rates of STDs among American adolescents which, despite the advocacy of abstinence-only even from the highest political office, all continue to be more widespread than in other western industrialized nations with integrated safe sex educational programs and intensive media campaigns advocating safe sex. A heated public and political debate on teen sex issues centered around morality and alleged behavioral problems among teens who get pregnant, teens who become mothers and teens who are infected with STDs in most cases fail to address the greatest socio-economic problem that often lead to these conditions, which is poverty. Jane Boykin, the President of the Forum on Children and Families in Jackson, Mississippi, has a valid point when she maintains that "Teen pregnancy is not about the lack of birth control or a lack of self-control. It's a lack of opportunity."[15] It is arguably much more simple to blame the individual rather than addressing the complex structural problems and socio-economic inequalities dividing the American population. But simple solutions will not solve these complex problems.

Although poverty is the overshadowing problem, widespread teen ignorance about safe sex is a related concern. Not all Mississippians working with teens support the abstinence-only message. Lexi Taylor, the Desoto Family Resource Center in Horn Lake, advocates an abstinence-plus program. Taylor says during our talk that based for the abstinence message to work, teenagers should "have the message hit them over and over, I think that would be useful. But I also think that they need to have correct birth control information handed to them .... Unfortunately, right now we are missing too many. We just are not getting the message out in Desoto County."[16] Taylor blames a large part of the failure to provide

14. Linda Berne & Barbara Huberman, "European Approaches to Adolescent Sexual Behavior & Responsibility," *Advocates for Youth*, Washington, DC, 1999, p. xvi.

15. Cited in Dahleen Glanton, "Births Add to Delta's Blues," *The Chicago Tribune*, March 26, 2001.

16. Interview with Lexi Taylor, Director, the Desoto Family Resource Center, Horn Lake, MS.

teens with instruction in safe sex practices on the taboo-ridden hesitancy among the school health counselors and others talking about sexual issues with teens. Taylor notes that "It is almost like [birth control] is something that no one is ready to face openly – and the problem just gets worse ... I think that too many girls just do not realize that 'Oh, you can get pregnant after having sex one time' or 'Oh, birth control really is important'" – ignorance that Taylor attests largely to lack of open and thorough safe sex education. In some poverty-stricken rural areas of the Mississippi Delta with particularly high teen birth rates, Taylor says, lack of education provides one essential explanation for the relatively many teen mothers. Another, often overlooked fact is the desperate lack of after-school activities for the children and teens to engage in. In such areas, Taylor asks, "What does a teenager really have to do, but have sex? I mean there is nobody around to really give them guidance, nothing really for them to do – no goals really that they are setting for themselves." The scope and complexities of the teen pregnancy and birth issues as expressed by Taylor underlines the urgency to address the underlying structural and socio-economic problems, like those described by Taylor, that arguably bear the primary responsibility for Mississippi's, and for America's, depressing record on teen pregnancy and birth issues, not to forget the spread of STDs.

According to estimates listed in "Sexually Transmitted Diseases Among American Youth: Incidence and Prevalence" 18.9 million new cases of STDs were recorded in 2000 in spite of reductions in their numbers during the 1990s. 9.1 million, or 48 percent, of these STDs were recorded among young Americans aged 15-24.[17] According to the pro-abstinence family.org, attempting to bring down these high rates by enhancing instruction in how to get and use e.g. condoms goes against common sense as well as against studies on condom use. In "Take Twelve – The Truth about Abstinence Education" the family.org's Abstinence Education Department maintains that it is a major distortion of factual evidence when abstinence-plus and safe sex advocates say that correct condom use provides the safest protection against STDs and

17. Hillard Weinstock, Stuart Berman and Willard Cates, Jr., "Sexually Transmitted Diseases among American Youth: Incidence and Prevalence Estimates, 2000," *Perspectives on Sexual and Reproductive Health*, 36/1 (2004) pp. 8-9.

unplanned pregnancies. The Center for Disease Control (CDC) points out that in order for condoms to be effective they have to be used consistently – where "Consistently means using a condom every time you have sex, 100 % of the time, no exceptions."[18] Yet according to the Abstinence Education Department, "Although the condom industry claims a 98 percent effectiveness rate for condoms, the fine print has to admit that this rate is for laboratory tests, not for actual use by teenage humans." In addition, "Condom failure rate during the first 12 months of use among teen females is as high as 22.5 percent." These facts and statistics are indeed thought-provoking, but they do not say to what extent lack of adequate instruction in how to use condoms correctly and in the importance of using them 'consistently' might be responsible. In fact, "Sex Education in America" which is comprised of a series of national surveys of students, parents, teachers and principles concludes that while public secondary school sex education nationwide typically covers issues like STDs and "the basics of reproduction, and abstinence .... More practical skills such as where to get and how to use birth control, how to talk to a partner about an STD, or where to get tested are less frequently covered."[19]

As indicated above, an often used argument against abstinence-plus education by abstinence-only advocates concerns itself with the alleged misconception that condom use is guaranteed protection from STDs and unintended pregnancy. They are right. Condoms are not bullet-proof protection against unwanted pregnancy and STDs. But neither is abstinence. For abstinence to be 100 percent effective, as assumed by the President and other abstinence-only advocates, it has to be used "with perfect consistency" as Dailard points out in "Understanding 'Abstinence': Implications for Individuals, Programs and Policies." However, as Dailard aptly says; "Common sense suggests that in the real world, abstinence as a contraceptive method can and does fail" (Dailard, pp. 4-5). A 2003 study published by the American Psychological Society shows that more than 60 percent of students in college who have taken a so-called 'virginity pledge' during their years in middle or high school, pledging to stay

18. Cited in "Take Twelve:The Truth About Abstinence Education," by The Abstinence Education Department, March 14, 2001, http://www.family.org/cforum/fosi/purity/facts/a0028451.cmf

19. "Sex Education in America," *The Henry J. Kaiser Family Foundation*, September 2000, p. 14.

abstinent until marriage, actually end up breaking their vow. This clearly indicates that abstinence as a contraceptive method has its flaws, just like condom use, and that 'fallen virginity pledgers' might face a great risk of catching an STD or of getting pregnant when they fail to abstain from sex outside marriage, because they may not have received adequate information on contraceptive use since abstinence-only has been the focus of their sex education.

But where do American teenagers and their parents position themselves on the issue of abstinence-only versus abstinence-plus? Could it be that the President and other abstinence-only advocates are out of touch with what the groups directly affected by abstinence-only policies believe to be important? Diverging conclusions are drawn. On the one hand, for example, the conservative Coalition for Adolescent Sexual Health with board members from organizations like Christian Coalition of America, Concerned Women for America and Traditional Values Coalition points to a 2003 Zogby poll that indicates that "Parents overwhelmingly reject comprehensive sex education when they understand what this education teaches their children .... Parents want their children to receive a strong message on abstinence."[20] In contrast, interviews conducted with parents in 2000 for the Kaiser Family Foundation show that "Not only do parents strongly support covering the 'core elements' already taught in most sex education – HIV/AIDS and other STDs, the basics of reproduction, and abstinence – they often want sex education to cover topics that are not uniformly taught, such as safer sex and negotiations skills" ("Sex Education in America," p. 4).

The same 2000 Kaiser Family Foundation study shows that students "want to know more about how to deal with the emotional issues and consequences of being sexually active and on how to talk to a partner about birth control and STDs." In addition, the study shows that "Students also want more information about what to do in cases of rape and sexual assault and about HIV/AIDS and other STDs." A National Campaign to Prevent Teenage Pregnancy study also from 2000 indicates that American teens are more inclined to support the abstinence-only message over safe-sex education. One of the conclusions from the study is that

20. "What Parents REALLY Think – About Different Forms of Sex Education," http://www.whatparentsthink.com

"An overwhelming majority of teens surveyed (93 percent) said that it is important for teens to be given a strong message from society that they should abstain from sex until they are at least out of high school."[21] In other words, there are studies out there that will support both sides of the argument over abstinence-only versus abstinence-plus education. It is, however, an incontestable fact that when President Bush in his 2004 State of the Union Address proposed to quadruple federal funding of abstinence-only education, he admittedly had no documented study showing the efficiency of abstinence-only in reducing the number of teen births and STDs to back his proposal, a fact that in itself shows that it is indeed conservative Christian fundamentalism, and maybe even a large degree of wishful thinking, that lies behind the Bush administration's conviction that abstinence-only provides one of the best solutions to the political and moral challenge to significantly reduce the number of teens having children and of teens being infected with STDs.

Works Cited

Bentley, Michael: Interview, Jackson MS, July 18, 2002.

Berne, Linda & Barbara Huberman, "European Approaches to Adolescent Sexual Behavior & Responsibility," *Advocates for Youth*, Washington, DC, 1999, pp. 1-85.

Bush, George W. "State of the Union Address," January 20, 2004.

Butch John, "Abstinence Only Message in State's Teen Pregnancy Fight," *The Clarion Ledger*, August 10, 1998, Main Section p. 1.

Crossette, Barbara, "U.S. Tells Teen Girls Worldwide to Just Say No," *Alternet*.org, May 29, 2002. http://www.alternet.org/print.html?StoryID=13229

Dailard, Cynthia, "Understanding 'Abstinence': Implications for Individuals, Programs and Policies," *The Alan Gutmacher Report on Public Policy*, 6/5 (2003) 4-6.

Glanton, Dahleen, "Births Add to Delta's Blues," *The Chicago Tribune*, March 26, 2001.

Maher, Bridget E, "Abstinence until Marriage: The Best Message for Teens," *The Family Research Council*, January 5, 2004. http://www.frc.org/get.cfm?1

Martin, Tascha & Quency Coleman: Interview, the 'Just Wait' Abstinence Unit,' Department of Human Services, Jackson, Mississippi, July 1, 2002.

"President Bush Wants Abstinence Program Funding Tripled by 2005," *Christian Life Resources*, January 22, 2004. http://www.ChristianLifeResources.com

21. "The Cautious Generation? Teens Tell Us about Sex, Virginity, and 'The Talk,'" *The National Campaign to Prevent Teen Pregnancy* NO HANKY PANKY!

Remez, Lisa, "Oral Sex among Adolescents. Is It Sex or Is It Abstinence?" *Family Planning Perspectives*, 32/6 (Nov.-Dec. 2000) 298-304.

"Safe Sex," *SIECUS*, 1992, http://www.siecus.org/advocacy/reviews/revi0005.html

"Sex Education in America: A Series of National Surveys of Students, Parents, Teachers, and Principals," *The Kaiser Family Foundation*, September 2000.

"Sex Education: Politicians, Parents, Teachers and Teens," *The Alan Guttmacher Institute*, 2001 Series, No. 2.

"Take Twelve: The Truth about Abstinence Education," The Abstinence Education Department, March 14, 2001 http://www.family.org/cforum/fosi/purity/facts/a0028451.cmf

Taylor, Lexi: Interview, the Desoto Family Resource Center, Horn Lake, MS.

"The Cautious Generation? Teens Tell Us about Sex, Virginity, and 'The Talk,'" *The National Campaign to Prevent Teen Pregnancy*, April 27, 2000, pp. 1-5.

"What Parents REALLY Think – About Different Forms of Sex Education," http://www.whatparentsthink.com

Weinstock, Hillard, Stuart Berman & Willard Cates, Jr., "Sexually Transmitted Diseases among American Youth: Incidence and Prevalence Estimates, 2000," *Perspectives on Sexual and Reproductive Health*, 36/1 (2004) 6-10.

"Welfare Reform Bill: HR 3734," Final Passage, Section 912 on 'Abstinence Education.'

"Working toward Independence," the 'Re-authorization Proposal of 2002.'